

ISSUE SLIP STAPLE AREA (for additional references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Tam</i>		9-27-01
O.I.P.E. CLASSIFIER	<i>AW</i>	32	10/16
FORMALITY REVIEW	<i>TB</i>	<i>Te 1102</i>	10-30-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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*8-15*  
*10/16/02*